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<b>SERIAL NUMBER</b> 10/658,879	<b>FILING OR 371(c) DATE</b> 09/09/2003 <b>RULE</b>	<b>CLASS</b> 703	<b>GROUP ART UNIT</b> 2128	<b>ATTORNEY DOCKET NO.</b> 3517.1
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\*\* CONTINUING DATA \*\*\*\*\* OK 8

This appln claims benefit of 60/409,396 09/09/2002 and claims benefit of 60/409,800 09/11/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* None 8

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/01/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>Shamir Patel</i>	Initials 8		

## ADDRESS

22886

## TITLE

Custom design method for resequencing arrays

<b>FILING FEE RECEIVED</b> 880	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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